## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10752937

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		1	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			37					RATE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			34 minus 20= *		* 17			X\$ 9=		OR	X\$18=	306	
INDEPENDENT CLAIMS			minus 3 = x		<u>*</u>	2		X43=		OR	X86=	172	
MU	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2			1	TOTAL	<b> </b>	OR	TOTAL	1248		
CLAIMS AS AMENDED - PART II									<del></del>	4	OTHER	THAN	
	1	(Column 1)	(Column 2			(Column 3)	_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CL AINA	-		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL DDIT. FEE			TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)		.5511.1221			NOOM: 1 EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***		=	ľ	X43=		OR	X86=		
i	FIRST PRESE	NTATION OF MU	LIPLE DEP	ENDENT	CLAIM		t	+145=		OR	+290=		
								TOTAL		L	TOTAL	•	
		ΑI	ODIT. FEE		OR ,	ADDIT. FEE							
_		(Column 1) CLAIMS		(Columi		(Column 3)	_	•		_			
MEN	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=		X43=			X86=		
`_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=		
* If	the entry in colum	nn 1 is less than the	entry in colum	nn 2 write "f	Y in colu	ımn 3.	Ŀ	+145= TOTAL		OR	+290=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
T	he "Highest Num	ber Previously Paid	For" (Total or	Independent	ess than I) is the I	is, enter is.		DIT. FEE L	opriate box				